

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		71435	03/7/04
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	9 5 12 6 7
1	01 04 02 07 8
2	✓ ✓ ✓ ✓ ✓
3	✓ ✓ ✓ ✓ ✓
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY If more than 150 claims or 10 actions  
staple additional sheet here

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